



Congressman Bill Cassidy

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In Louisiana Only 1-800-892-1253

Grant Request Form

Grant Seeker: _____

Organization Name: _____

Contact Number: _____

Contact Email: _____

Contact Address: _____

City: _____ State: _____ Zip: _____

General Focus (check appropriate category (ies) :

____ Health/Medical ____ Rural Dev. ____ Law Enforcement ____ Small Business Administration [SBA]

____ Faith Based/Community Initiative ____ Education ____ Veteran ____ Tourism/Recreation

Service Area: _____

Estimated funding amount: _____

Description:

Signature

Date